Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF PUERTO RICO	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

06/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Id	lentify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your fo	ull name		
	Write th	he name that is on	EDWIN	
	picture	overnment-issued identification (for le, your driver's	First name	First name
	license	or passport).	Middle name	Middle name
		our picture	ORTIZ ORTIZ	
		cation to your g with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.		er names you have n the last 8 years	EDWIN ORTIZ	
		e your married or n names.		
3.	your S numbe Individ	he last 4 digits of ocial Security er or federal lual Taxpayer ication number	xxx-xx-3468	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EIN	☐ I have not used any business name or EINs.  Business name(s)  EIN
5.	Where you live	URB LA HACIENDA 54 ST AN-18 Guayama, PR 00784 Number, Street, City, State & ZIP Code	If Debtor 2 lives at a different address:  Number, Street, City, State & ZIP Code
		Guayama	Number, Street, Oity, State & Zir Gode
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  PO BOX 2973	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Guayama, PR 00785  Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

Par	t 2: Tell the Court About	our Bar	nkruptcy Ca	ase				
7.	The chapter of the Bankruptcy Code you are				each, see <i>Notice Rec</i> ge 1 and check the a		342(b) for Individuals Filir	ng for Bankruptcy
	choosing to file under	☐ Cha	pter 7					
		☐ Cha	pter 11					
		☐ Cha	pter 12					
		■ Cha	pter 13					
8.	How you will pay the fee	a 0	bout how yo	ou may pay. Typica attorney is submitt	lly, if you are paying	the fee yourself, you r	erk's office in your local comay pay with cash, cashie may pay with a credi	er's check, or money
						this option, sign and	attach the Application for	Individuals to Pay
		□ I b	request that ut is not rec	at my fee be waive quired to, waive you	r fèe, and may do so	only if your income is	are filing for Chapter 7. B	ficial poverty line that
							s). If you choose this option (3B) and file it with your pe	
9.	Have you filed for bankruptcy within the	■ No.						
	last 8 years?	☐ Yes.						
			District				<del></del>	
			District		When		Case number	
			District		When		Case number	
10.	Are any bankruptcy cases pending or being	■ No						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor				Relationship to you	
			District		When		Case number, if known	
			Debtor				Relationship to you	
			District		When		Case number, if known	
11.	Do you rent your	■ No.	Go to	line 12.				
	residence?	☐ Yes.	Has yo	our landlord obtaine	ed an eviction judgme	ent against you?		
				No. Go to line 12.				
				Yes. Fill out <i>Initial</i> this bankruptcy pe		Eviction Judgment A	gainst You (Form 101A) a	nd file it as part of

Case number (if known)

Debtor 1 **EDWIN ORTIZ ORTIZ** 

Deb	otor 1 <b>EDWIN ORTIZ OR</b>	TIZ			Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Owr	n as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of busi	ness
	A sole proprietorship is a				
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, State	e & ZIP Code
	it to this petition.		Chec	k the appropriate box	to describe your business:
				Health Care Busin	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
Par	Chapter 11 of the Bankruptcy Code, and are you a <i>small business debtor</i> or a debtor as defined by 11 U.S. C. § 1182(1)? For a definition of <i>small business debtor</i> , see 11 U.S.C. § 101(51D).	you are ccash-flow § 1116(1) No.  No.  Yes.	choosing to statement (B). I am to Code I am to I do not choose	to proceed under Sub- int, and federal incom- not filing under Chapter 1 filing under Chapter 1 dot choose to proceed filing under Chapter 1 se to proceed under S	can set appropriate deadlines. If you indicate that you are a small business debtor or ochapter V, you must attach your most recent balance sheet, statement of operations, he tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. ter 11.  1, but I am NOT a small business debtor according to the definition in the Bankruptcy  1, I am a small business debtor according to the definition in the Bankruptcy Code, and dunder Subchapter V of Chapter 11.  1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I Subchapter V of Chapter 11.
14.	Do you own or have any	■ No.		. , , ,	• •
	property that poses or is				
	alleged to pose a threat of imminent and identifiable hazard to public health or safety?	☐ Yes.	What is	the hazard?	
	Or do you own any property that needs immediate attention?			diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
					Number, Street, City, State & Zip Code

#### Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Dec	tor 1 EDWIN OR 112 OR	114			IMDer (if known)
Par	6: Answer These Quest	ions for Re	eporting Purposes		
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are rsonal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			■ Yes. Go to line 17.		
		16b.		<b>pusiness debts?</b> Business debts are devestment or through the operation of the	
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	owe that are not consumer debts or bus	siness debts
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	er 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	☐ Yes.		Do you estimate that after any exempt provailable to distribute to unsecured credit	property is excluded and administrative expenses tors?
	administrative expenses		□ No		
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes		
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000	□ 25,001-50,000
	you estimate that you owe?	☐ 50-99		□ 5001-10,000	<b>5</b> 0,001-100,000
		☐ 100-19 ☐ 200-99	· -	□ 10,001-25,000	☐ More than100,000
19.	How much do you	□ \$0 - \$9	50,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your assets to be worth?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	
20.	How much do you estimate your liabilities	□ \$0 - \$9		□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	to be?		01 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
		_ ' '	001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$500 million	_ ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `
Par	7: Sign Below				
For	you	I have ex	amined this petition, and I de	eclare under penalty of perjury that the ir	nformation provided is true and correct.
				7, I am aware that I may proceed, if elig relief available under each chapter, and	ible, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.
		If no attor	ney represents me and I did t, I have obtained and read t	not pay or agree to pay someone who i he notice required by 11 U.S.C. § 342(b	is not an attorney to help me fill out this ).
		I request	relief in accordance with the	chapter of title 11, United States Code,	specified in this petition.
		bankrupto and 3571	cy case can result in fines up		ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519
		<b>EDWIN</b>	IN ORTIZ ORTIZ ORTIZ ORTIZ of Debtor 1	Signature of De	ebtor 2
		Executed	on November 18, 2022	2 Executed on	
			MM / DD / YYYY		MM / DD / YYYY

Debtor 1	EDWIN ORTIZ ORTIZ	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ MANUEL E FUSTER MARTINEZ	Date	November 18, 2022
Signature of Attorney for Debtor		MM / DD / YYYY
MANUEL E FUSTER MARTINEZ		
Printed name		
MANUEL E. FUSTER MARTINEZ		
Firm name		
P.O. BOX 1464		
Guayama, PR 00785		
Number, Street, City, State & ZIP Code		
Contact phone <b>7878643015</b>	Email address	fuster_law_office@yahoo.com
200513 PR		
Bar number & State		

Fill	n this information to identify your case:		
Deb			
Deb	First Name Middle Name Last Name		
	ei if, filing) First Name Middle Name Last Name		
Unit	d States Bankruptcy Court for the: DISTRICT OF PUERTO RICO		
Cas (if kn	number	_	ck if this is an
		amei	ided illing
∩ff	cial Form 106Sum		
	nmary of Your Assets and Liabilities and Certain Statistical Information		12/15
Be a	complete and accurate as possible. If two married people are filing together, both are equally responsible fonation. Fill out all of your schedules first; then complete the information on this form. If you are filing amende original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Part	1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	32,500.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	66,539.66
	1c. Copy line 63, Total of all property on Schedule A/B	\$	99,039.66
Part	2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	90,602.74
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	8,528.92
	Your total liabilities	\$	99,131.66
Part	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,178.36
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	878.36
Part	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other so	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persona	l, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this	box and	submit this form to

the court with your other schedules.

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,271.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

Debtor 1	EDWIN ORTIZ	ORTIZ				
	First Name	Middle	Name	Last Name		
Debtor 2 Spouse, if filing)	First Name	Middle	Name	Last Name		
Inited States B	Sankruptcy Court for th	ne: DISTRICT	OF PUER	TO RICO		
Case number						☐ Check if this is a
						amended filing
Official Fo	orm 106A/B					
	le A/B: Pro	operty				12/15
formation. If monswer every que	ore space is needed, attestion.	tach a separate sh	heet to this	arried people are filing together, both are form. On the top of any additional pages state You Own or Have an Interest In		
Do you own or	have any legal or equi	table interest in a	ıny residen	ice, building, land, or similar property?		
☐ No. Go to Pa	art 2					
Yes Where						
Yes. Where	e is the property?					
Yes. Where						
			What is	the property? Check all that apply		
.1 URB LA	e is the property?  HACIENDA St. 54			the property? Check all that apply Single-family home	Do not deduct secured of	
.1 URB LA	e is the property?		<b>S</b>		the amount of any secure	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
.1 URB LA	e is the property?  HACIENDA St. 54		<b>■</b> 5	Single-family home	the amount of any secure	ed claims on Schedule D:
.1 URB LA	e is the property?  HACIENDA St. 54			Single-family home Duplex or multi-unit building	the amount of any secure Creditors Who Have Clas	ed claims on Schedule D: ims Secured by Property.
.1 URB LA	HACIENDA St. 54 s, if available, or other descri			Single-family home  Duplex or multi-unit building  Condominium or cooperative	the amount of any secure	ed claims on Schedule D:
.1 URB LA Street address	HACIENDA St. 54 s, if available, or other descri	ption		Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home	the amount of any secure Creditors Who Have Clair	ed claims on Schedule D: ims Secured by Property.  Current value of the
URB LA Street address	HACIENDA St. 54 s, if available, or other descri	ption 00784-0000		Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  and  nvestment property  Fimeshare	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$65,000.00  Describe the nature of	Current value of the portion you own? \$32,500.0
.1 URB LA Street address	HACIENDA St. 54 s, if available, or other descri	ption 00784-0000		Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  and  nvestment property  Timeshare  Other	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$65,000.00  Describe the nature of	current value of the portion you own? \$32,500.0
URB LA Street address	HACIENDA St. 54 s, if available, or other descri	ption 00784-0000	■ S	Single-family home  Duplex or multi-unit building  Condominium or cooperative  Manufactured or mobile home  and  nvestment property  Fimeshare	Current value of the entire property? \$65,000.00  Describe the nature of (such as fee simple, ter	Current value of the portion you own? \$32,500.0
URB LA Street address	HACIENDA St. 54 s, if available, or other descri	ption 00784-0000	■ S	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home and nvestment property Timeshare Other us an interest in the property? Check one	Current value of the entire property? \$65,000.00  Describe the nature of (such as fee simple, ter	Current value of the portion you own? \$32,500.0
URB LA Street address  Guayama City	HACIENDA St. 54 s, if available, or other descri	ption 00784-0000	■ S	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home and nivestment property  Timeshare Other as an interest in the property? Check one Debtor 1 only	current value of the entire property? \$65,000.00  Describe the nature of (such as fee simple, ter a life estate), if known.	Current value of the portion you own? \$32,500.0  your ownership interest nancy by the entireties, o
URB LA Street address  Guayama City  Guayama	HACIENDA St. 54 s, if available, or other descri	ption 00784-0000	■ S S S S S S S S S S S S S S S S S S S	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property  Fimeshare Dther Las an interest in the property? Check one Debtor 1 only Debtor 2 only	Current value of the entire property? \$65,000.00  Describe the nature of (such as fee simple, ter	Current value of the portion you own? \$32,500.0  your ownership interest nancy by the entireties, o
URB LA Street address  Guayama City  Guayama	HACIENDA St. 54 s, if available, or other descri	ption 00784-0000	S   S   C   C   C   C   C   C   C   C	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Dither Lis an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Information you wish to add about this ite	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$65,000.00  Describe the nature of (such as fee simple, ter a life estate), if known.	Current value of the portion you own? \$32,500.0  your ownership interest nancy by the entireties, o
URB LA Street address  Guayama City  Guayama	HACIENDA St. 54 s, if available, or other descri	ption 00784-0000	Who ha	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Other List an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Information you wish to add about this itely identification number:	the amount of any secure Creditors Who Have Clair  Current value of the entire property? \$65,000.00  Describe the nature of (such as fee simple, ter a life estate), if known.	Current value of the portion you own? \$32,500.0  your ownership interest nancy by the entireties, o
URB LA Street address  Guayama City  Guayama	HACIENDA St. 54 s, if available, or other descri	ption 00784-0000	Who ha	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Dither Las an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Information you wish to add about this ite Ity identification number:  CAIN 3 BEDROOM, 1 BATHROOM	the amount of any secure Creditors Who Have Clair  Current value of the entire property? \$65,000.00  Describe the nature of (such as fee simple, ter a life estate), if known.	Current value of the portion you own? \$32,500.0  your ownership interest nancy by the entireties, o
URB LA Street address  Guayama City  Guayama	HACIENDA St. 54 s, if available, or other descri	ption 00784-0000	Who ha  Other ir  propert  CONT  GARA  WITH	Single-family home Duplex or multi-unit building Condominium or cooperative  Manufactured or mobile home Land Investment property Timeshare Dither Las an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Information you wish to add about this ite Ity identification number:  CAIN 3 BEDROOM, 1 BATHROOM	the amount of any secure Creditors Who Have Clair Current value of the entire property?  \$65,000.00  Describe the nature of y (such as fee simple, ter a life estate), if known.  Check if this is cor (see instructions)  m, such as local  M, LIVING ROOM, DIN	Current value of the portion you own? \$32,500.0  your ownership interest nancy by the entireties, o

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Debt	or 1 El	DWIN ORTIZ ORTIZ		Case number (if known)	
3. <b>C</b> a	ars, vans,	trucks, tractors, sport utility ve	ehicles, motorcycles		
П	No				
	Yes				
_	165				
3.1	Make:	HONDA	Who has an interest in the property? Check one		d claims or exemptions. Put
0	Model:	CIVIC	■ Debtor 1 only		ured claims on Schedule D: Claims Secured by Property.
	Year:	2015	☐ Debtor 2 only	Current value of the	Current value of the
	Approxim	ate mileage: 144,000	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other info	ormation:	$\square$ At least one of the debtors and another		
			☐ Check if this is community property (see instructions)	\$9,000.00	\$9,000.00
Ex			nd other recreational vehicles, other vehicles, atercraft, fishing vessels, snowmobiles, motorcycl		
			vn for all of your entries from Part 2, including that number here		\$9,000.00
Part :	3: Describ	e Your Personal and Household I	tems		
Do y	ou own o	r have any legal or equitable ir	nterest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
E		goods and furnishings Major appliances, furniture, linens	s, china, kitchenware		
		HOUSEHOLD (	GOODS AND FURNISHINGS		\$200.00
E		ncluding cell phones, cameras, r		nters, scanners; music colle	ctions; electronic devices
				I	
E		Antiques and figurines; paintings, other collections, memorabilia, co	prints, or other artwork; books, pictures, or other ollectibles	art objects; stamp, coin, or	baseball card collections;
E	xamples: S	nusical instruments	nd other hobby equipment; bicycles, pool tables, o	golf clubs, skis; canoes and	kayaks; carpentry tools;
	i <b>rearms</b> Examples:	Pistols, rifles, shotguns, ammun	ition, and related equipment		

Official Form 106A/B Schedule A/B: Property page 2

Deptor	EDWIN OR HZ OR I	IZ .	Case number (if known)	
□Ye	s. Describe			
11. <b>Clot</b>	hes			
_Exa	mples: Everyday clothes, fu	urs, leather coats, des	igner wear, shoes, accessories	
□ No	s. Describe			
- 16	s. Describe			
	CLO <sup>-</sup>	THES		\$100.00
12. <b>Jew</b>	elry			
	mples: Everyday jewelry, co	ostume jewelry, engag	gement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
■ Ye	s. Describe			
	JEW	ELRY		\$50.00
13. <b>Non</b>	-farm animals			
Exa	mples: Dogs, cats, birds, ho	orses		
■ No	s. Describe			
		ehold items vou did :	not already list, including any health aids you did not list	
■ No		,	,,,,,,,	
□ Ye	s. Give specific information	n		
15 <b>A</b> A	d the dollar value of all of	vour entries from P	art 3, including any entries for pages you have attached	
			art 3, meruding any entires for pages you have attached	\$500.00
	Describe Your Financial Asse own or have any legal or		any of the following?	Current value of the
20 ,00	omi or navo any logar or	<b>04</b> 0.000	any or the remaining.	portion you own? Do not deduct secured claims or exemptions.
16. <b>Cas</b> l	1			
Exa	mples: Money you have in	your wallet, in your ho	me, in a safe deposit box, and on hand when you file your petit	on
□ No ■ Ye	S			
			Cash	\$20.00
			Casii	
	osits of money			harran and athan also lan
	institutions. If you ha		ounts; certificates of deposit; shares in credit unions, brokerage with the same institution, list each.	nouses, and other similar
□ No	S		Institution name:	
	<b></b>		BANCO POPULAR	
	17.1	. CHECKING	ACCOUNT #9432	\$30.00
			ELECTRO-COOP	
	17.2	SHARES	ACCOUNT # 3667	\$4,889.66
18 <b>Ro</b> n	ds, mutual funds, or publ	icly traded stocks		
Exa	mples: Bond funds, investn	nent accounts with bro	okerage firms, money market accounts	
■ No	S	Institution or issuer r	name:	
<b>—</b> 16	J			

De	ebtor 1	<b>EDWIN ORTI</b>	IZ ORTIZ		Case number (if known)	
19.	•	ublicly traded sto enture	ock and interests in incorporate	ed and unincorporated businesse	es, including an interest in	an LLC, partnership, and
	■ No					
	☐ Yes.	Give specific info	ormation about them Name of entity:		% of ownership:	
20.	Negoti	iable instruments	include personal checks, cashiers	le and non-negotiable instrumen s' checks, promissory notes, and m r to someone by signing or deliveri	oney orders.	
		Give specific info	ormation about them Issuer name:			
21.		ment or pension ples: Interests in I		), thrift savings accounts, or other p	pension or profit-sharing plar	ns
	_	List each accoun	t separately.  Type of account:	Institution name:		
			SAVING AND SHARES	AEELA		\$2,100.00
			401K			\$50,000.00
22.	Your s Examp ■ No		d deposits you have made so that	you may continue service or use for utilities (electric, gas, water), tele		, or others
23.	■ No			you, either for life or for a number o	of years)	
	☐ Yes	lss	suer name and description.			
24.			on IRA, in an account in a qualifi 529A(b), and 529(b)(1).	ied ABLE program, or under a qu	ualified state tuition progra	ım.
	☐ Yes	Ins	stitution name and description. Se	parately file the records of any inte	rests.11 U.S.C. § 521(c):	
25.	Trusts	, equitable or fut	ture interests in property (other	than anything listed in line 1), ar	nd rights or powers exercis	sable for your benefit
	☐ Yes.	Give specific info	ormation about them			
26.			ademarks, trade secrets, and other in the common administration of the com	her intellectual property om royalties and licensing agreeme	ents	
	☐ Yes.	Give specific info	ormation about them			
27.			and other general intangibles mits, exclusive licenses, cooperati	ve association holdings, liquor lice	nses, professional licenses	
		Give specific info	ormation about them			
M	oney or	property owed to	o you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	. Tax ref	funds owed to yo	ou			
	■ No	•				
	☐ Yes.	Give specific info	rmation about them, including whe	ether you already filed the returns a	and the tax years	

Official Form 106A/B Schedule A/B: Property page 4

De	eptor 1	EDWIN ORTIZ ORTIZ	Case number (if known)	
29.		r support ples: Past due or lump sum alimony, spousal support, chil	d support, maintenance, divorce settlement, property	settlement
	No			
	☐ Yes.	Give specific information		
30.	Exam <sub>l</sub>	amounts someone owes you  ples: Unpaid wages, disability insurance payments, disabil  benefits; unpaid loans you made to someone else	lity benefits, sick pay, vacation pay, workers' compen	sation, Social Security
	■ No □ Yes.	Give specific information		
31.		sts in insurance policies ples: Health, disability, or life insurance; health savings ac	count (HSA); credit, homeowner's, or renter's insuran	ce
	No			
	☐ Yes.	Name the insurance company of each policy and list its vector company name:	alue. Beneficiary:	Surrender or refund
				value:
32.	If you somed	terest in property that is due you from someone who lare the beneficiary of a living trust, expect proceeds from one has died.		ive property because
	■ No			
	☐ Yes.	Give specific information		
33.	Exam <sub>l</sub> ■ No	s against third parties, whether or not you have filed a ples: Accidents, employment disputes, insurance claims, of Describe each claim		
	□ 1es.	Describe each claim		
34.	Other o	contingent and unliquidated claims of every nature, in	ncluding counterclaims of the debtor and rights to	set off claims
	☐ Yes.	Describe each claim		
35.	_ `	nancial assets you did not already list		
	■ No □ Yes.	Give specific information		
36		the dollar value of all of your entries from Part 4, inclu art 4. Write that number here		\$57,039.66
Pa	rt 5: De	escribe Any Business-Related Property You Own or Have an I	nterest In. List any real estate in Part 1.	
	•	own or have any legal or equitable interest in any business-re	elated property?	
	No. Go	o to Part 6.		
ı	☐ Yes. (	Go to line 38.		
Pa	ort 6: De	escribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	You Own or Have an Interest In.	
46.		u own or have any legal or equitable interest in any far	rm- or commercial fishing-related property?	
	No.	Go to Part 7.		
	☐ Yes	s. Go to line 47.		
Pa	nrt 7:	Describe All Property You Own or Have an Interest in That	You Did Not List Above	

	Do you have other property of any kind you did not already list?  Examples: Season tickets, country club membership			
_	No			
	Yes. Give specific information			
54.	Add the dollar value of all of your entries from Part 7. Write that	t number here		\$0.00
Part	8: List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$32,500.00
56.	Part 2: Total vehicles, line 5	\$9,000.00	_	
57.	Part 3: Total personal and household items, line 15	\$500.00		
58.	Part 4: Total financial assets, line 36	\$57,039.66		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$66,539.66	Copy personal property total	\$66,539.66
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$99,039.66

Debtor 1 EDWIN ORTIZ ORTIZ

Case number (if known)

Fi	ll in this inform	ation to identify your ca	ase:			
De	ebtor 1	EDWIN ORTIZ ORT				]
De	ebtor 2	First Name	Middle Name	L	ast Name	
	oouse if, filing)	First Name	Middle Name	L	ast Name	
Ur	nited States Ban	kruptcy Court for the:	DISTRICT OF PUERTO RIC	0		
	ase number					☐ Check if this is an amended filing
0	fficial For	m 106C				
S	chedule	C: The Pro	perty You Cla	im	as Exempt	4/22
the nee	property you lis	ted on Schedule A/B: Pro attach to this page as many	operty (Official Form 106A/B)	as yo	our source, list the property that you	r supplying correct information. Using claim as exempt. If more space is additional pages, write your name and
spe any fun exe	ecific dollar am y applicable sta ids—may be ur emption to a pa	ount as exempt. Alterna atutory limit. Some exen Ilimited in dollar amoun	atively, you may claim the fo nptions—such as those for it. However, if you claim an	ull fai healt exen	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement
Pa	art 1: Identify	the Property You Clair	n as Exempt			
1.	Which set of	exemptions are you cla	iming? Check one only, ever	n if yo	our spouse is filing with you.	
	☐ You are cla	iming state and federal n	onbankruptcy exemptions. 1	1 U.S	S.C. § 522(b)(3)	
	You are cla	iming federal exemptions	. 11 U.S.C. § 522(b)(2)			
2.	For any prope	erty you list on Schedul	e A/B that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on			Am	ount of the exemption you claim	Specific laws that allow exemption
	Schedule A/B ti	hat lists this property	Copy the value from Schedule A/B			
	_	CIENDA St. 54 AN-18 R 00784 Guayama	\$32,500.00		\$15,542.50	11 U.S.C. § 522(d)(1)
	County CONTAIN 3 BATHROOM ROOM AND WITH A PAR	BEDROOM, 1 I, LIVING ROOM, DIN GARAGE. RTICIPATION OF HIS E MRS. NAYDA I.	ING		100% of fair market value, up to any applicable statutory limit	
		D GOODS AND	\$200.00	_	\$200.00	11 U.S.C. § 522(d)(3)
	FURNISHING Line from School		φ200.00	_	100% of fair market value, up to any applicable statutory limit	J ( ),
	ELECTRON		\$150.00		\$150.00	11 U.S.C. § 522(d)(3)
	Line from Sch	eaule A/B: <b>7.1</b>			100% of fair market value, up to any applicable statutory limit	
	CLOTHES	antida A/D 44 4	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
	Line from Sch	edule A/B: <b>11.1</b>			100% of fair market value, up to any applicable statutory limit	

Debtor	1 EDWIN ORTIZ ORTIZ			Case number (if known)	
	Brief description of the property and line on Current value of Schedule A/B that lists this property portion you own		Amount of the exemption you claim		Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
-	EWELRY	\$50.00		\$50.00	11 U.S.C. § 522(d)(4)
LII	ne from <i>Schedule A/B</i> : <b>12.1</b>			100% of fair market value, up to any applicable statutory limit	
_	ash ne from <i>Schedule A/B</i> : <b>16.1</b>	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
LII	ne nom <i>schedule Arb.</i> 10.1			100% of fair market value, up to any applicable statutory limit	
_	HECKING: BANCO POPULAR CCOUNT #9432	\$30.00		\$30.00	11 U.S.C. § 522(d)(5)
	ne from <i>Schedule A/B</i> : <b>17.1</b>			100% of fair market value, up to any applicable statutory limit	
	D1K: ne from Schedule A/B: 21.2	\$50,000.00		\$20,303.41	11 U.S.C. § 522(d)(12)
LII	ie IIIII Schedule AVD. 21.2			100% of fair market value, up to any applicable statutory limit	
(S	re you claiming a homestead exemption ubject to adjustment on 4/01/25 and every	3 years after that for ca	ases fi	,	,
	Yes. Did you acquire the property cover  No	red by the exemption wi	ithin 1	,215 days before you filed this case?	<b>)</b>

☐ Yes

	in this information to identify yo	our case.			
Deb	etor 1 EDWIN ORTIZ	<del></del>		_	
D - I	First Name	Middle Name Last Name			
	use if, filing)  First Name	Middle Name Last Name		-	
		DIOTRIOT OF BUEDTO BIOG			
Unit	ed States Bankruptcy Court for th	e: DISTRICT OF PUERTO RICO		-	
	e number				
(if kn	own)			_	if this is an
				amend	led filing
Off	icial Form 106D				
		s Who Have Claims Secured	l by Proport	<b>N</b> /	40/45
<u> </u>	neddie D. Creditor	S WIIO Have Claims Secured	by Propert	<u>y                                    </u>	12/15
		e. If two married people are filing together, both are equ			
	eded, copy the Additional Page, fill l per (if known).	t out, number the entries, and attach it to this form. On	the top of any addition	nai pages, write your na	me and case
I. Do	any creditors have claims secured	by your property?			
	☐ No. Check this box and submit	this form to the court with your other schedules. Yo	ou have nothing else	to report on this form.	
	■ Yes. Fill in all of the informatio	n helow	-	·	
Par		. 20.0			
		s more than one secured claim, list the creditor separately	Column A	Column B	Column C
for e	ach claim. If more than one creditor h	as a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
muc	h as possible, list the claims in alphabe	etical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1	ASOCIACION DE				
2.1	EMPLEADOS	Describe the property that secures the claim:	\$5,220.00	\$2,100.00	\$3,120.00
	Creditor's Name	SAVING AND SHARES: AEELA			
	DE ELA DE PR				
	PO BOX 364508	As of the date you file, the claim is: Check all that			
	San Juan, PR 00936	apply. ☐ Contingent			
	Number, Street, City, State & Zip Code	☐ Unliquidated			
		☐ Disputed			
	o owes the debt? Check one.	Nature of lien. Check all that apply.			
Who	Debtor 1 only	■ An agreement you made (such as mortgage or sect	ured		
_	obtor i only				
	Debtor 2 only	car loan)			
	•	car loan)  Statutory lien (such as tax lien, mechanic's lien)			
	Debtor 2 only	′			
	Debtor 2 only Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			

Debtor 1 EDWIN ORTIZ ORTIZ	C	ase number (if known)		
First Name Mide	lle Name Last Name			
2.2 BANCO POPULAR DE PUERTO RICO	Describe the property that secures the claim:	\$13,771.15	\$9,000.00	\$4,771.15
Creditor's Name	2015 HONDA CIVIC 144,000 miles			
PO BOX 362708 San Juan, PR 00936-2708	As of the date you file, the claim is: Check all that apply.  Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed <b>Nature of lien.</b> Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or sector car loan)	ured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and anoth	•			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 2019	Last 4 digits of account number 0001			
2.3 COOP A/C ELECTRO-COOP	Describe the property that secures the claim:	\$8,000.00	\$4,889.66	\$3,110.34
Creditor's Name  AVE. CONDADO SAN	SHARES: ELECTRO-COOP ACCOUNT # 3667			
ALBERTO 605 STE. 307 San Juan, PR 00907-3811	As of the date you file, the claim is: Check all that apply.  Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mortgage or sector car loan)	ured		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and anoth				
Check if this claim relates to a	Other (including a right to offset)			

3667

Date debt was incurred 05/2022

Last 4 digits of account number

Debtor 1 EDWIN ORTIZ ORTIZ		Case number (if known)		
First Name Middle N	lame Last Name			
2.4 SISTEMA DE RETIRO DE EMPLEADOS	Describe the property that secures the claim:	\$33,915.00	\$65,000.00	\$0.00
DEL GOBIERNO DE PUERTO RICO PO BOX 42003 San Juan, PR 00940  Number, Street, City, State & Zip Code  Who owes the debt? Check one.	URB LA HACIENDA St. 54 AN-18 Guayama, PR 00784 Guayama County CONTAIN 3 BEDROOM, 1 BATHROOM, LIVING ROOM, DINING ROOM AND GARAGE. WITH A PARTICIPATION OF HIS FORME WIFE MRS. NAYDA I. ALVARADO. As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only	■ An agreement you made (such as mortgage or	secured		
☐ Debtor 2 only	car loan)	secureu		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 5082	2		
2.5 SISTEMA DE RETIRO DE EMPLEADOS	Describe the property that secures the claim:	\$29,696.59	\$50,000.00	\$0.00
Creditor's Name  DEL GOBIERNO DE  PUERTO RICO  PO BOX 42003  San Juan, PR 00940	As of the date you file, the claim is: Check all that apply.  ☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or car loan)	secured		
Debtor 2 only				
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Statutory lien (such as tax lien, mechanic's lien) ☐ Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred 2019	Last 4 digits of account number 1074	4		
	W	400 000		
Add the dollar value of your entries in C If this is the last page of your form, add	Column A on this page. Write that number here:	\$90,602.7		
Write that number here:	ac value totale irolli ali pages.	\$90,602.7	74	
Part 2: List Others to Pa Notified fo	or a Dobt That You Already Listed			

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this in	formation to identify your	case:					
Debtor 1	EDWIN ORTIZ OR	TI7					
200101	First Name	Middle Na	me	Last Name		<del></del>	
Debtor 2	First Name	Marine Me		Last Name			
(Spouse if, filing)	First Name	Middle Na	me	Last Name			
United States	Bankruptcy Court for the:	DISTRICT O	F PUERTO RIC	0			
Case number	•						
(if known)	· -		-				Check if this is an
							amended filing
Official Ed	orm 106E/F						
	E/F: Creditors W	ho Hayo	Uncocuro	d Claime			12/15
					Part 2 for or	reditors with NONPRIORITY cla	
Schedule G: Ex Schedule D: Cr left. Attach the name and case	ecutory Contracts and Unexpeditors Who Have Claims Section Continuation Page to this pagenumber (if known).	ired Leases (Off ured by Propert e. If you have no	icial Form 106G) y. If more space i o information to i	. Do not include s needed, copy	any credito	n Schedule A/B: Property (Office ors with partially secured claim or need, fill it out, number the e hat Part. On the top of any add	s that are listed in ntries in the boxes on the
	st All of Your PRIORITY Un						
	editors have priority unsecure	d claims agains	t you?				
No. Go	to Part 2.						
☐ Yes.							
Part 2: Lis	st All of Your NONPRIORIT	Y Unsecured	Claims				
	editors have nonpriority unsec						
	u have nothing to report in this pa	_	•	th vour other sch	edules		
_	a nave nothing to report in the pr	art. Odbriik tillo it	om to the oddit wi	ar your outor oom	Jaaioo.		
Yes.							
unsecured	claim, list the creditor separately	for each claim.	For each claim list	ed, identify what	type of claim	h claim. If a creditor has more the it is. Do not list claims already in riority unsecured claims fill out the	cluded in Part 1. If more
							Total claim
ASO	CIACION DE EMPLEAD	OS DE					
	DE PR		Last 4 digits of a	ccount number	3468		\$3,120.00
•	riority Creditor's Name	,	When was the de	bt incurred?	2020		
	3OX 364508				2020		_
	Juan, PR 00936						
	er Street City State Zip Code incurred the debt? Check one.	į	As of the date yo	u file, the claim	is: Check all	that apply	
_							
_	ebtor 1 only		Contingent				
	ebtor 2 only		Unliquidated				
_	ebtor 1 and Debtor 2 only		☐ Disputed  Type of NONPRIC	ORITY unsecure	d claim:		
	least one of the debtors and and	Julei	Student loans	Zitti i unisecule	u ciaiiii.		
L Ch debt	neck if this claim is for a comm	nunity		sing out of a sens	aration agree	ement or divorce that you did not	
	claim subject to offset?		report as priority c	laims	a.ioii agiee	s.n or arroroo that you did flot	
■ No	)		Debts to pensi	on or profit-sharir	ig plans, and	d other similar debts	
☐ Ye	es .		Other. Specify	PERSONAL	LOAN		

Debte	or 1 EDWIN ORTIZ ORTIZ		Case number (if known)	
4.2	CAPITAL ONE	Last 4 digits of account number	9591	\$1,395.14
	Nonpriority Creditor's Name PO BOX 71083	When was the debt incurred?	01/2021	
	Charlotte, NC 28272-1083  Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify CREDIT CA	ARD	
4.3	COOP A/C ELECTRO-COOP	Last 4 digits of account number	3667	\$3,110.34
	Nonpriority Creditor's Name AVE. SAN ALBERTO 605 STE. 307	When was the debt incurred?	05/2022	
	San Juan, PR 00907-3811			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify PERSONAL		
		— Other. Specify		
4.4	DPT DE TRANSPORTACION Y	Last 4 digits of account number	2303	\$50.00
	Nonpriority Creditor's Name OBRAS PUBLICA DE ELA PR PO BOX 41269	When was the debt incurred?	27/08/2022	
	San Juan, PR 00902			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify ADMINISTE	RATIVE FEES	

Debtor	EDWIN ORTIZ ORTIZ		Case number (if known)						
4.5	DPT DE TRANSPORTACION Y  Nonpriority Creditor's Name	Last 4 digits of account number	2302	\$300.00					
	OBRAS PUBLICA DE ELA PR PO BOX 41269 San Juan, PR 00902	When was the debt incurred?	27/08/2022						
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim							
	■ Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	$\square$ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims							
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts						
	Yes	Other. Specify ADMINISTF							
4.6	DPT DE TRANSPORTACION Y	Last 4 digits of account number	2304	\$100.00					
	Nonpriority Creditor's Name OBRAS PUBLICA DE ELA PR	When was the debt incurred?	27/08/2022						
	PO BOX 41269	When was the dept incurred?	21/00/2022						
	San Juan, PR 00902	_							
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply						
	Who incurred the debt? Check one.	_							
	Debtor 1 only	☐ Contingent							
	☐ Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed							
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt	Obligations arising out of a sepa							
	Is the claim subject to offset?	<u></u>	report as priority claims  Debts to pension or profit-sharing plans, and other similar debts						
	■ No								
	Yes	Other. Specify ADMINISTE	RATIVES FEES						
4.7	DPT DE TRANSPORTACION Y  Nonpriority Creditor's Name	Last 4 digits of account number	8253	\$100.00					
	OBRAS PUBLICA DE ELA PR PO BOX 41269	When was the debt incurred?	20/06/2019						
	San Juan, PR 00902								
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply						
	Who incurred the debt? Check one.								
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	☐ Disputed						
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	Type of NONPRIORITY unsecured claim:						
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	<ul> <li>☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>☐ Debts to pension or profit-sharing plans, and other similar debts</li> </ul>							
	■ No								
	☐ Yes	Other. Specify ADMINISTE							
	00	Otner. Specify     ADMINITOR							

Debtor 1 EDWIN ORTIZ ORTIZ		ORTIZ ORTIZ						
4.8	FREEDOM Nonpriority Cre	ROAD FINANCIAL	Last 4 digits of account number	1671		_	\$243.94	
	PO BOX 4		When was the debt incurred?	12/2	021			
-		t City State Zip Code	As of the date you file, the claim	As of the date you file, the claim is: Check all that apply				
	Who incurred	the debt? Check one.						
	Debtor 1 or	nly	☐ Contingent					
	Debtor 2 or	nlv	☐ Unliquidated					
	_	nd Debtor 2 only	Disputed					
	_	e of the debtors and another	Type of NONPRIORITY unsecur	ed claim:				
	_	nis claim is for a community	☐ Student loans					
	debt	is claim is for a community	Obligations arising out of a ser	paration ag	greement o	or divorce that you did not		
	Is the claim s	ubject to offset?	report as priority claims	·		•		
	No		Debts to pension or profit-shar	ing plans,	and other	similar debts		
	☐ Yes		Other. Specify PERSONA	AL LOA	N			
4.9		ORLD SYSTEMS INC.	Last 4 digits of account number	0771		_	\$109.50	
		editor's Name NIA DR. SUITE 514 ington, PA 19034-8770	When was the debt incurred?	2021				
-		t City State Zip Code	As of the date you file, the claim	n is: Chec	k all that a	pply		
	Who incurred	the debt? Check one.						
	Debtor 1 or	nly	☐ Contingent					
	Debtor 2 or	nly	☐ Unliquidated					
	Debtor 1 a	nd Debtor 2 only	☐ Disputed					
	☐ At least on	e of the debtors and another	Type of NONPRIORITY unsecur	ed claim:				
	☐ Check if this claim is for a community debt		☐ Student loans					
			Obligations arising out of a sep	paration a	greement (	or divorce that you did not		
	_	ubject to offset?	report as priority claims					
	No		☐ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes		Other. Specify HEALTH \$					
Part 3:	List Othe	rs to Be Notified About a Debt	That You Already Listed					
is tryir have n notifie	ng to collect fr nore than one ed for any debt	you have others to be notified abo om you for a debt you owe to som creditor for any of the debts that y is in Parts 1 or 2, do not fill out or s	eone else, list the original creditor ou listed in Parts 1 or 2, list the ad- ubmit this page.	in Parts 1	or 2, the	n list the collection agency	y here. Similarly, if you	
Part 4:		Amounts for Each Type of Unse						
	the amounts o f unsecured c	f certain types of unsecured claims laim.	s. This information is for statistical	reporting	purpose	s only. 28 U.S.C. §159. Ad	d the amounts for each	
71						Total Claim		
	6a	. Domestic support obligations		6a.	\$	0.00		
Total							-	
claims from Pa	rt 1 6b	. Taxes and certain other debts y	ou owe the government	6b.	\$	0.00		
	6c.	. Claims for death or personal inj	ury while you were intoxicated	6c.	\$	0.00	_	
	6d	. Other. Add all other priority unsec	ured claims. Write that amount here.	6d.	\$	0.00	_	
	6e	. Total Priority. Add lines 6a throug	yh 6d.	6e.	\$	0.00		
						Total Claim		
	6f.	Student loans		6f.	\$	0.00	_	
Total claims								
from Pa	<b>rt 2</b> 6g		aration agreement or divorce that	60	\$	0.00		
	6h	you did not report as priority cla Debts to pension or profit-shari	nims ng plans, and other similar debts	6g. 6h.	\$ 	0.00	-	
	6i.		secured claims. Write that amount	6i.	\$	8,528.92	_	

Debtor 1	EDWIN ORTIZ ORTIZ	Case number (if known)	
	here.		

6j. **Total Nonpriority.** Add lines 6f through 6i. 6j. \$\_\_\_\_\_\_**8,528.92** 

Fill in this inform					
Debtor 1					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO					
Case number _					
(if known)					☐ Check if this is an
					amended filing

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company wit	h whom you have the c er, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<del>-</del>
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5	-				
	Name				_
	Number	Street			_
	City		State	ZIP Code	
	,			0000	

Fill in thi	is informa	ation to identify your	case:			
Debtor 1		EDWIN ORTIZ OR	RTIZ			
Dobtor 2		First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f		First Name	Middle Name	Last Name		
United St	tates Bank	kruptcy Court for the:	DISTRICT OF PUERTO R	ICO		
Case nur	mber					
(if known)	_					Check if this is an amended filing
Officia	al For	m 106H				
		H: Your Cod	ebtors			12/15
50110	<del>dale i</del>	ii. i oui oou	CDtO13			12/13
people ar fill it out,	re filing to and num	ogether, both are equiple the entries in the	ally responsible for supplyi	ng correct information	on. If more space is n	ate as possible. If two married eeded, copy the Additional Page, o of any Additional Pages, write
1. Do	o you hav	e any codebtors? (If	you are filing a joint case, do	not list either spouse a	as a codebtor.	
	0					
■ Ye	es					
			lived in a community prop Nevada, New Mexico, Puerto			states and territories include
□ No	o. Go to lir	ne 3.				
■ Ye	es. Did yo	ur spouse, former spou	use, or legal equivalent live w	ith you at the time?		
	□ No					
	Yes.					
	In	which community state	e or territory did you live?	-NONE-	Fill in the name ar	nd current address of that person.
		me of your spouse, former spounder, Street, City, State & Zip				
in lir Forn	ne 2 agair	n as a codebtor only i Schedule E/F (Official	f that person is a guarantor	or cosigner. Make s	ure you have listed th	g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
		1: Your codebtor nber, Street, City, State and ZI	P Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt sthat apply:
3.1	URB LA	A I ALVARADO A HACIENDA ST 54 ma, PR 00784	AN-18		■ Schedule D, lin □ Schedule E/F, □ Schedule G _ SISTEMA DE RE	

Fill	in this information to identify your o	case:				I				
Del	btor 1 EDWIN OR	ΓΙΖ ORTIZ								
	btor 2  buse, if filing)				_					
Uni	ited States Bankruptcy Court for the	e: DISTRICT OF PUER	TO RICO							
	se number nown)		-					d filing ent showin	g postpetition	
$\bigcirc$	fficial Form 106I					_			ollowing date:	
	chedule I: Your Inc	ome				N	MM / DD/ Y	YYY		12/15
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form.	i are married and not filli ur spouse is not filing wi On the top of any additi	ng jointly, and your sith you, do not include	spouse de infor	is liv mati	ing with on abou	you, inclu t your spo	ude inforr ouse. If m	nation about ore space is i	your needed,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fi	iling spouse	
	If you have more than one job,		■ Employed	■ Employed			☐ Emplo	oyed		
	attach a separate page with information about additional employers.	Employment status	☐ Not employed				☐ Not er	mployed		
	Include part-time, seasonal, or self-employed work.	Occupation  Employer's name	DEPTO. TRANS	_	Y					
	Occupation may include student or homemaker, if it applies.	Employer's address	CENTRO GUBERNAMENTAL MINILLAS EDIF. SUR PISO 4 PARADA 2 San Juan, PR 00940							
		How long employed t	here? 24 year	s						
Par	rt 2: Give Details About Mo	nthly Income								
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to re	eport for	any	line, writ	e \$0 in the	space. In	clude your nor	n-filing
,	ou or your non-filing spouse have me e space, attach a separate sheet to		ombine the information	n for all	empl	oyers for	that perso	n on the li	nes below. If y	ou need
						For De	btor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3	3,271.00	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	3,2	71.00	\$	N/A	

				Fo	r Debtor 1		or Debtor		
	Com	, line 4 have	4	\$	2 274 00		on-filing s	•	
	Copy	y line 4 here	4.	Φ_	3,271.00	_ \$		N/A	=
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	418.44	. \$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$	523.38			N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00			N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$	510.78			N/A	_
	5e.	Insurance	5e.	\$	114.00	_ :		N/A	_
	5f.	Domestic support obligations	5f.	\$	0.00			N/A	_
	5g.	Union dues	5g.	\$	49.02	_		N/A	_
	5h.	Other deductions. Specify: MORTGAGE RETIRO AEE	5h.+	: -	477.02	_		N/A	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 6.	\$	2,092.64	_		N/A	_
7.		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,178.36	_		N/A	_
8.				· -	.,	_ '			-
0.	8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross							
		receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	\$_	0.00	_		N/A	_
	8b.	Interest and dividends	8b.	\$_	0.00	_ \$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce							
		settlement, and property settlement.	8c.	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$		N/A	_
	8e.	Social Security	8e.	\$	0.00	\$		N/A	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:	8f.	\$	0.00	\$		N/A	
	8g.	Pension or retirement income	 8g.	\$	0.00	_		N/A	_
	8h.	Other monthly income. Specify:	8h.+	- \$		+ \$		N/A	=
						-			_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$_	0.00	\$		N/A	4
10	Calc	ulate monthly income. Add line 7 + line 9.	10. \$		1,178.36 +		N/A	= \$	1,178.36
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			1,170.30		- 11/1	{¯  ਁ −	1,170.30
11.	State Inclu- other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are not a	depen				n Schedule	e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						\$	1,178.36
12	Da ::	ou expect on increase or degrees within the year often you file this famous	2					Combi	ned ly income
13.	<b>■</b>	ou expect an increase or decrease within the year after you file this form No.	f 						
		Yes. Explain:							

Fill	in this information to identify yo	our case:					
Deb	tor 1 EDWIN ORT	IZ ORTIZ			Check	if this is:	
Deb	tor 2				_	An amended filing  A supplement show	ving postpetition chapter
(Spo	ouse, if filing)					3 expenses as of	
Unit	ed States Bankruptcy Court for the	: DISTRI	CT OF PUERTO RICO		N	MM / DD / YYYY	
	e number						
(II K	nown)						
O	fficial Form 106J						
	chedule J: Your	Exper	nses				12/15
Be	as complete and accurate as ormation. If more space is ne mber (if known). Answer eve	s possible eded, atta	. If two married people ar ach another sheet to this				
Par 1.	t 1: Describe Your House Is this a joint case?	ehold					
	■ No. Go to line 2. □ Yes. <b>Does Debtor 2 live</b>	in a separ	ate household?				
	☐ No ☐ Yes. Debtor 2 mu:	st file Offic	ial Form 106J-2, <i>Expense</i> s	for Separate House	hold of Debto	or 2.	
2.	Do you have dependents?	■ No					
	Do not list Debtor 1 and Debtor 2.	☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the						□ No
	dependents names.						□ Yes □ No
							Yes
							□ No □ Yes
							□ No
							☐ Yes
3.	Do your expenses include expenses of people other t yourself and your depende	han _	No Yes				
	t 2: Estimate Your Ongoi						
exp	imate your expenses as of y penses as of a date after the plicable date.	our bankr bankrupto	uptcy filing date unless y ey is filed. If this is a supp	ou are using this fo lemental <i>Schedul</i> e	orm as a sup J, check the	plement in a Cha box at the top of	pter 13 case to report f the form and fill in the
	lude expenses paid for with						
	value of such assistance an ficial Form 106I.)	d have in	cluded it on <i>Schedule I: Y</i>	our Income		Your expe	enses
4.	The rental or home owners payments and any rent for the		-	nclude first mortgage	4. \$		0.00
	If not included in line 4:						
	4a. Real estate taxes				4a. \$		0.00
	4b. Property, homeowner's	-			4b. \$		0.00
	<ul><li>4c. Home maintenance, re</li><li>4d. Homeowner's associa</li></ul>				4c. \$ 4d. \$		50.00 0.00
5.	Additional mortgage paym			me equity loans	5. \$		0.00

Debtor 1	EDWIN C	ORTIZ ORTIZ	Case num	ber (if known)	
s. Utili	ities:				
6a.		heat, natural gas	6a.	\$	80.00
6b.	-	ver, garbage collection	6b.	\$	34.14
				\$	
6c.	•	e, cell phone, Internet, satellite, and cable services	6c.	· —	69.22
6d.	Other. Spe		6d.	\$	0.00
		ekeeping supplies	7.	\$	200.00
		hildren's education costs	8.	\$	0.00
Clo	thing, laund	ry, and dry cleaning	9.	\$	40.00
. Per	sonal care p	roducts and services	10.	\$	40.00
. Med	dical and de	ntal expenses	11.	\$	15.00
	nsportation. not include ca	Include gas, maintenance, bus or train fare.	12.	\$	250.00
		clubs, recreation, newspapers, magazines, and boo	<b>ks</b> 13.	\$	0.00
		ributions and religious donations	14.		0.00
	ırance.	institution and rongious dentations		<u> </u>	0.00
		surance deducted from your pay or included in lines 4	or 20		
	. Life insura	, , ,	15a.	\$	0.00
	. Health ins		15b.	·	0.00
	. Treattitins . Vehicle ins		15c.	\$	
				·	0.00
		rance. Specify:	15d.	\$	0.00
Spe	cify:	clude taxes deducted from your pay or included in lines	4 or 20. 16.	\$	0.00
		ease payments:			
17a	. Car payme	ents for Vehicle 1	17a.	\$	0.00
17b	. Car payme	ents for Vehicle 2	17b.	\$	0.00
17c	. Other. Spe	ecify:	17c.	\$	0.00
17d	. Other. Spe	ecify:	17d.	\$	0.00
		of alimony, maintenance, and support that you did		Φ.	0.00
		your pay on line 5, Schedule I, Your Income (Officia			
Oth	er payments	s you make to support others who do not live with y		\$	0.00
	cify:		19.		
		erty expenses not included in lines 4 or 5 of this for			
		s on other property	20a.	·	0.00
20b	<ul> <li>Real estat</li> </ul>	e taxes	20b.	\$	0.00
20c	. Property, I	nomeowner's, or renter's insurance	20c.	\$	0.00
20d	. Maintenan	ce, repair, and upkeep expenses	20d.	\$	0.00
20e	. Homeown	er's association or condominium dues	20e.	\$	0.00
Oth	er: Specify:	LUNCH	21.		100.00
. •	on opcony.	LONOIT			100.00
	•	nonthly expenses			
22a	. Add lines 4	through 21.		\$	878.36
22b	. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official	Form 106J-2	\$	
	. ,	a and 22b. The result is your monthly expenses.		\$	878.36
220	220	and LLD. The result is your monthly expenses.			010.30
B. Cal	culate your i	monthly net income.			
		12 (your combined monthly income) from Schedule I.	23a.	\$	1,178.36
23b	. Copy your	monthly expenses from line 22c above.	23b.	-\$	878.36
	, , ,			·	
23c		our monthly expenses from your monthly income. is your <i>monthly net income</i> .	23c.	\$	300.00
For	example, do yo ification to the	an increase or decrease in your expenses within the ou expect to finish paying for your car loan within the year or do terms of your mortgage?			r decrease because of a
		[=			
	res.	Explain here:			

Fill in thi	is information to identify your	case:			
Debtor 1	EDWIN ORTIZ OF	PT17			
Dobtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f	filing) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	DISTRICT OF PUERTO	RICO		
Case nur	mber				
(if known)				_	check if this is an
				a	mended filing
	aration About a				12/15
		, , ,			
				Making a false statement, conc fines up to \$250,000, or impris	
	both. 18 U.S.C. §§ 152, 1341, 1				
	Sign Below				
Did	you pay or agree to pay some	one who is NOT an attor	ney to help you fill out ba	ankruptcy forms?	
	No				
П	Yes. Name of person			Attach Bankruptcy Petiti	on Preparer's Notice.
				Declaration, and Signati	
	er penalty of perjury, I declare they are true and correct.	that I have read the sum	mary and schedules filed	with this declaration and	
v	/o/ EDWIN ORTIZ ORTIZ		X		
	/s/ EDWIN ORTIZ ORTIZ EDWIN ORTIZ ORTIZ		Signature of D	Debtor 2	
-	Signature of Debtor 1		Signature of L	70X101 L	
ı	Date <b>November 18, 2022</b>		Date		

	Lin this inform	and an extra delication and				
		nation to identify you				
De	ebtor 1	EDWIN ORTIZ O	Middle Name	Last Name		
1	ebtor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ban	kruptcy Court for the:	DISTRICT OF PUERTO F	RICO		
	se number					theck if this is an mended filing
St	as complete a	of Financial		re filing together, both are	equally responsible for sup	
		ore space is needed, ). Answer every que		this form. On the top of any	y additional pages, write you	ir name and case
			rital Status and Where You	Lived Before		
1.	what is your	current marital statu	15 ?			
	<ul><li>■ Married</li><li>■ Not marr</li></ul>	ried				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	■ No □ Yes. List	all of the places you l	ived in the last 3 years. Do no	ot include where you live now	<i>'</i> .	
	Debtor 1:		Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
<b>3.</b> sta					ity property state or territory ico, Texas, Washington and W	
	□ No					
		ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Explain	n the Sources of You	r Income	,		
4.	Fill in the total	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$32,710.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Debtor 1 EDWIN ORTIZ ORTIZ					Case number (if known)						
					Debtor 1			Debtor 2			
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)		Sources of income Check all that apply.		Gross income (before deductions and exclusions)	
For last calendar year: (January 1 to December 31, 2021)				31, 2021 )	■ Wages, commissions, bonuses, tips	mmissions, \$18,650.00			☐ Wages, commissions, bonuses, tips		
					☐ Operating a business			☐ Operating a l	business		
			lar year bef December 3		■ Wages, commissions, bonuses, tips		\$42,368.00	☐ Wages, combonuses, tips	missions,		
					☐ Operating a business			☐ Operating a I	business		
	winr	vinnings. If you are filing a joint ca			pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lotte se and you have income that you received together, list it only once under Debtor 1.  ome from each source separately. Do not include income that you listed in line 4.						
					Debtor 1			Debtor 2			
					Sources of income Describe below.	each s	income from source e deductions and ions)	Sources of inco		Gross income (before deductions and exclusions)	
Part	t 3:	List	Certain Pay	ments You	Made Before You Filed for E	Bankrupt	су				
6.	Are □	are either Debtor 1's or Debtor 2's debts primarily consumer debts?							ne total amount you nd alimony. Also, do creditor. Do not		
	Cre	editor'	s Name and	Address	Dates of paymer	nt	Total amount paid	Amount you still owe	Was this p	ayment for	

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporation of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.								
	■ No								
	☐ Yes. List all payments to an insider.								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the	his payment			
В.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?								
	Include payments on debts guaranteed or cosigned by an insider.								
	■ No								
	☐ Yes. List all payments to an insider								
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credite				
Par	rt 4: Identify Legal Actions, Repossession	ns and Foreclosures							
I GI	identify Legal Actions, Repossession	ns, and i orcciosures							
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.								
	■ No								
	☐ Yes. Fill in the details.								
	Case title Case number	Nature of the case			Status of the case				
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.								
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>								
	Creditor Name and Address	Describe the Property Da			ate Value of t prope				
		Explain what happene	d						
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?								
	No								
	☐ Yes. Fill in the details.								
	Creditor Name and Address	Describe the action the	e creditor took	Date take	action was	Amount			
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?								
	No								
	☐ Yes								
Pai	rt 5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?								
	<ul><li>No</li><li>Yes. Fill in the details for each gift.</li></ul>								
	Gifts with a total value of more than \$600 per person	Describe the gifts		Date the o	s you gave	Value			
	Person to Whom You Gave the Gift and Address:				, <del>.</del>				

Case number (if known)

Debtor 1 EDWIN ORTIZ ORTIZ

14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  No									
	☐ Yes. Fill in the details for each gift or Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	total	Describe what you contributed		Dates you contributed	Value				
Pai	rt 6: List Certain Losses									
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling?									
	■ No □ Yes. Fill in the details.									
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the le e the amount that insurance has paid. I nce claims on line 33 of Schedule A/B:	_ist pending	Date of your loss	Value of property lost				
Pai	rt 7: List Certain Payments or Transfe			7						
16.	Within 1 year before you filed for bankr consulted about seeking bankruptcy of Include any attorneys, bankruptcy petition	r prepari	ing a bankruptcy petition?			ty to anyone you				
	No									
	Yes. Fill in the details.		December of an arrangement of an arrangement of a second of a seco		Data was was and	Amazont of				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment				
	MANUEL E FUSTER MARTINEZ PO BOX 1464 Guayama, PR 00785 fusterma@hotmail.com		ATTORNEY FEES		\$300.00					
	US BANKRUPTCY COURT SAN JUAN, PR		FILING FEES			\$313.00				
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.									
	Yes. Fill in the details.									
	Person Who Was Paid Address		Description and value of any prop transferred	erty	Date payment or transfer was made	Amount of payment				
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.									
	Yes. Fill in the details.		Description and value of	Dosoribo	any proporty or	Date transfer was				
	Person Who Received Transfer Address  Person's relationship to you		Description and value of property transferred		any property or received or debts change	Date transfer was made				
	i orgon o relationalily to you									

Case number (if known)

Debtor 1 EDWIN ORTIZ ORTIZ

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No										
	☐ Yes. Fill in the details.										
	Name of trust	Description and v	alue of the propert	y transferred	Date Transfer was made						
Pa	t 8: List of Certain Financial Accounts, Instr	uments, Safe Deposit	Boxes, and Storag	ge Units							
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or chouses, pension funds, cooperatives, associated.	other financial accour	nts; certificates of c								
	No										
	Yes. Fill in the details.										
		ast 4 digits of account number	Type of account of instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer						
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?										
	■ No □ Yes. Fill in the details.										
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		scribe the contents	Do you still have it?						
22.											
	■ No □ Yes. Fill in the details.										
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		scribe the contents	Do you still have it?						
Pai	t 9: Identify Property You Hold or Control fo	r Someone Else									
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ıde any property yo	ou borrowed from, are storing	for, or hold in trust						
	■ No □ Yes. Fill in the details.										
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		scribe the property	Value						
Pai	t 10: Give Details About Environmental Inform	mation									
For	the purpose of Part 10, the following definition	s apply:									
	Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these states.	air, land, soil, surface	water, groundwat	•							
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa		environmental law,	whether you now own, operate	e, or utilize it or used						

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

hazardous material, pollutant, contaminant, or similar term.

Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?												
	■ No □ Yes. Fill in the details.											
		ne of site Iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice						
25.	Have	you notified any governmental unit of	any release of hazardous material?									
		■ No □ Yes. Fill in the details.										
		ne of site Iress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice						
26.	Have	you been a party in any judicial or adn	ninistrative proceeding under any envi	iron	mental law? Include settlements ar	nd orders.						
		No Yes. Fill in the details.										
		e Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ture of the case	Status of the case						
Par	t 11:	Give Details About Your Business or	Connections to Any Business									
27.	With	Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?										
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time											
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)											
		☐ A partner in a partnership										
		☐ An officer, director, or managing executive of a corporation										
	☐ An owner of at least 5% of the voting or equity securities of a corporation											
	No. None of the above applies. Go to Part 12.											
		Yes. Check all that apply above and fill	in the details below for each business	s.								
		siness Name	Describe the nature of the business		Employer Identification number	umber or ITIN						
	Address (Number, Street, City, State and ZIP Code)  Name of accountant or bookkeeper  Name of accountant or bookkeeper  Dates business existed											
28.		in 2 years before you filed for bankrupt tutions, creditors, or other parties.	cy, did you give a financial statement	to a	nyone about your business? Includ	de all financial						
		No Yes. Fill in the details below.										
		ne Iress nber, Street, City, State and ZIP Code)	Date Issued									

Debtor 1 EDWIN ORTIZ ORTIZ		Case number (if known)
Part 12: Sign Below		
are true and correct. I understand that	making a false statement, concealing pones up to \$250,000, or imprisonment for	nents, and I declare under penalty of perjury that the answers roperty, or obtaining money or property by fraud in connection up to 20 years, or both.
/s/ EDWIN ORTIZ ORTIZ		
EDWIN ORTIZ ORTIZ Signature of Debtor 1	Signature of Debtor	2
Date November 18, 2022	Date	
, ,	ur Statement of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
■ No □ Yes		
_	who is not an attorney to help you fill ou	t bankruptcy forms?
No		

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Fill in this information to identify your case:							
_							
-							
_							
=							

Check as directed in lines 17 and 21:									
According to the calculations required by this Statement:									
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).								
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).								
	3. The commitment period is 3 years.								
	4. The commitment period is 5 years.								

☐ Check if this is an amended filing

### Official Form 122C-1

# Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part	1: Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one or	nly.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11.							
10 th	Il in the average monthly income that you received from all 01(10A). For example, if you are filing on September 15, the 6-ne 6 months, add the income for all 6 months and divide the tota couses own the same rental property, put the income from that property.	nonth peri	od would in the re	be March 1 thro	ugh Aug de any i	gust 31. If the amo	ount of your monthly incomore than once. For example	e varied during e, if both
					Colur Debte		Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime, payroll deductions).	and cor	nmissio	ons (before all	\$	3,271.00	\$	
3.	<ol> <li>Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.</li> </ol>				\$	0.00	\$	
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments you listed on line 3.						0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor '	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or far	rm \$	0.00	Copy here ->	\$	0.00	\$	
6.	Net income from rental and other real property	Debtor '	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	<b>-</b> \$	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy here ->	\$	0.00	\$	

					Colum Debto		Column I Debtor 2 non-filin			
7.	Interest, o	dividends, and royalties			\$	0.	.00 \$			
8.	Unemploy	yment compensation			\$	0.	.00 \$			
	the Social	Security Act. Instead, list it he			r					
	For you			0.00						
•		r spouse								
9.	benefit un not include United Sta disability, pay paid u does not e	der the Social Security Act. Alse any compensation, pension, ates Government in connection or death of a member of the under chapter 61 of title 10, the exceed the amount of retired p	include any amount received the so, except as stated in the next pay, annuity, or allowance paid in with a disability, combat-relate informed services. If you receive in include that pay only to the exay to which you would otherwise ther than chapter 61 of that title	sentence, do by the d injury or ed any retired xtent that it e be entitled		0.	.00_ \$			
10.	Do not increceived a domestic t United Statistically, of the control of the contr	lude any benefits received und as a victim of a war crime, a cri terrorism; or compensation, pe ates Government in connection	ted above. Specify the source a der the Social Security Act; payr me against humanity, or interna- ension, pay, annuity, or allowand in with a disability, combat-relate informed services. If necessary, total below.	ments ational or be paid by the d injury or	}					
					\$	0.	.00 \$			
					\$	0.	.00 \$			
	Т	otal amounts from separate pa	ages, if any.	+	\$	0.	.00 \$			
11.			income. Add lines 2 through 10 umn A to the total for Column B.		3,271.0		\$		3,271.00	
Part	2: De	termine How to Measure You	ur Deductions from Income						Thursy income	
12. 13.	Copy you Calculate	r total average monthly inco	me from line 11. ck one:					\$	3,271.0	<u>0</u>
	■ You a	are not married. Fill in 0 below								
	☐ You a	are married and your spouse is	s filing with you. Fill in 0 below.							
	Fill in depe	ndents, such as payment of th	ed in line 11, Column B, that wa e spouse's tax liability or the sp	ouse's suppo	ort of som	neone oth	er than you or yo	our depend	lents.	
	adjus	stments on a separate page.	ng this income and the amount	oi income de	votea to	each pur	pose. Il necessa	ry, list addi	uonai	
	ir this	adjustment does not apply, e	inei u beiuw.	\$						
				\$						
				<b>+</b> \$						
		Total		\$		0.00	Copy here=>		0	0.00
14.	Your cui	rrent monthly income. Subtr	act line 13 from line 12.				_	\$	3,271.0	<u>0</u>
15.		e your current monthly inco	me for the year. Follow these	steps:				\$	3,271.0	0_

Debtor 1	_	EDWI	N ORTIZ ORTIZ		Case number (if known)					
		Mul	tiply line 15a by 12 (the number of months in	n a year).		_	<b>x</b> 12			
1	15b	. The	result is your current monthly income for th	e year for this part of t	he form	\$_	39,252.00			
16. <b>C</b> a	alc	ulate t	he median family income that applies to	you. Follow these step	OS:					
16	Sa.	Fill in t	he state in which you live.	PR						
16	ßb.	Fill in t	he number of people in your household.	1						
16		To find	he median family income for your state and d a list of applicable median income amount tions for this form. This list may also be ava	s, go online using the		\$	27,013.00			
17. <b>H</b> o	ow	do the	e lines compare?							
17	7a.		Line 15b is less than or equal to line 16c. 0 11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N							
17	7b.		Line 15b is more than line 16c. On the top 1325(b)(3). <b>Go to Part 3 and fill out Calc</b> your current monthly income from line 14 a	ulation of Your Dispo						
Part 3:		Calc	ulate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)						
18. <b>C</b> c	ору	your	total average monthly income from line	11.		\$	3,271.00			
19. <b>D</b> e	edu onte	ict the end tha	marital adjustment if it applies. If you are it calculating the commitment period under come, copy the amount from line 13.	married, your spouse	e is not filing with you, and you					
19	∂a.	If the n	narital adjustment does not apply, fill in 0 or	line 19a.		-\$	0.00			
19	9b.	Subtra	act line 19a from line 18.			\$_	3,271.00			
20. <b>C</b> a	alc	ulate y	our current monthly income for the year	. Follow these steps:						
20	a.	Сору I	ine 19b			\$	3,271.00			
		Multipl	y by 12 (the number of months in a year).				<b>x</b> 12			
20	Db.	The re	sult is your current monthly income for the y	rear for this part of the	form	\$	39,252.00			
20	Oc.	Copy t	he median family income for your state and	size of household from	m line 16c	\$_	27,013.00			
21	1.	How d	lo the lines compare?							
			ine 20b is less than line 20c. Unless otherw eriod is 3 years. Go to Part 4.	ise ordered by the cou	ırt, on the top of page 1 of this form, ch	eck box 3,	The commitment			
			ine 20b is more than or equal to line 20c. Uncommitment period is 5 years. Go to Part 4.	nless otherwise ordere	ed by the court, on the top of page 1 of	this form,	check box 4, The			
Part 4:		Sign	Below							
Ву	y si	gning l	nere, under penalty of perjury I declare that	the information on this	statement and in any attachments is t	rue and co	orrect.			
E	ΕD	WIN C	N ORTIZ ORTIZ ORTIZ ORTIZ							
	_		of Debtor 1 ember 18, 2022							
			DD /YYYY							
lf :	yοι	ı check	ked 17a, do NOT fill out or file Form 122C-2							
lf :	yοι	ı check	xed 17b, fill out Form 122C-2 and file it with	this form. On line 39 o	of that form, copy your current monthly	income fro	m line 14 above.			

EDWIN ORTIZ ORTIZ	Case number (if known)	

Debtor 1

Fill in	this information to identify your case:		
Debto	r 1 EDWIN ORTIZ ORTIZ	_	
Debto (Spou	r 2 se, if filing)	_	
United	States Bankruptcy Court for the: District of Puerto Rico		
Case (if kno	number wn)	☐ Check if th	is is an amended filing
	npter 13 Calculation of Your Disposable	: Income	04/2:
	out this form, you will need your completed copy of <i>Chapter 13 Stat</i> hitment Period (Official Form 122C-1).	ement of Your Current Monthly Inco	me and Calculation of
space	complete and accurate as possible. If two married people are filing is needed, attach a separate sheet to this form, Include the line nun onal pages, write your name and case number (if known).		
Part 1	Calculate Your Deductions from Your Income		
the info	e Internal Revenue Service (IRS) issues National and Local Standard questions in lines 6-15. To find the IRS standards, go online using primation may also be available at the bankruptcy clerk's office.	the link specified in the separate ins	tructions for this form. This
exp	duct the expense amounts set out in lines 6-15 regardless of your actual lenses if they are higher than the standards. Do not include any operating C-1, and do not deduct any amounts that you subtracted from your spot	g expenses that you subtracted from inc	come in lines 5 and 6 of Form
If yo	our expenses differ from month to month, enter the average expense.		
Not	e: Line numbers 1-4 are not used in this form. These numbers apply to in	nformation required by a similar form us	sed in chapter 7 cases.
5.	The number of people used in determining your deductions from	ncome	
	Fill in the number of people who could be claimed as exemptions on you plus the number of any additional dependents whom you support. This the number of people in your household.		1
Nat	tional Standards You must use the IRS National Standards to	answer the questions in lines 6-7.	
6.	<b>Food, clothing, and other items:</b> Using the number of people you ent Standards, fill in the dollar amount for food, clothing, and other items.	ered in line 5 and the IRS National	\$
7.	Out-of-pocket health care allowance: Using the number of people you the dollar amount for out-of-pocket health care. The number of people people who are 65 or olderbecause older people have a higher IRS a higher than this IRS amount, you may deduct the additional amount on	is split into two categoriespeople who llowance for health car costs. If your ac	are under 65 and

People	who are under 65 years of age								
7a.	Out-of-pocket health care allowance per person	\$	75						
7b.	Number of people who are under 65	Х	1						
7c.	Subtotal. Multiply line 7a by line 7b.	\$	75.00		Copy here=>	\$_	75.00		
People	who are 65 years of age or older								
7d.	Out-of-pocket health care allowance per person	\$	153						
7e.	Number of people who are 65 or older	Х	0						
7f.	Subtotal. Multiply line 7d by line 7e.	\$	0.00		Copy here=>	\$	0.00		
7g.	Total. Add line 7c and line 7f			\$	75.00	Co	opy total here=>	\$	75.00
Local St	tandards You must use the IRS Local Standards t	o answe	er the guestic	ons in line	es 8-15.				
	on information from the IRS, the U.S. Trustee Pro		•			for ho	ousing for		
_ `	sing and utilities - Insurance and operating exper	ses							
■ Hous	sing and utilities - Mortgage or rent expenses								
	ver the questions in lines 8-9, use the U.S. Truste						sing the link sp	ecified in	the
	e instructions for this form. This chart may also be using and utilities - Insurance and operating exp						line 5, fill		
in t	he dollar amount listed for your county for insurance	and ope	erating exper	ises.			\$_		506.00
9. <b>Ho</b>	using and utilities - Mortgage or rent expenses:								
9a.	Using the number of people you entered in line 5, listed for your county for mortgage or rent expense		dollar amou	nt		\$_	443.00		
9b.	Total average monthly payment for all mortgages a	and othe	er debts secu	red by y	our home.				
	To calculate the total average monthly payment, a contractually due to each secured creditor in the 6 for bankruptcy. Next divide by 60.								
	Name of the creditor		Average mo	nthly					
	SISTEMA DE RETIRO DE EMPLEADOS	\$	54	77.02					
	9b. Total average monthly paymen	nt \$	;4	77.02	Copy here=> -	\$	477.02	Repeat thi	is amount a.
9c.	Net mortgage or rent expense.								
	Subtract line 9b (total average monthly payment) for rent expense). If this number is less than \$0, en		9a ( <i>mortga</i> g	<i>ie</i>	\$	0	.00 Copy	\$	0.00
	ou claim that the U.S. Trustee Program's division					incor	rect and	\$	0.00

Explain why:

11.	Local transportation expenses: Check the number of vehicle	es for which you claim	an ownership or	operating e	expense.				
	□ 0. Go to line 14.								
	■ 1. Go to line 12.								
	2 or more. Go to line 12.								
12.	<b>Vehicle operation expense:</b> Using the IRS Local Standards operating expenses, fill in the <i>Operating Costs</i> that apply for y					315.00			
13.	<b>Vehicle ownership or lease expense:</b> Using the IRS Local S You may not claim the expense if you do not make any loan of more than two vehicles.								
Ve	Describe Vehicle 1:								
13a	Ownership or leasing costs using IRS Local Standard		. \$	0.00					
13b.	Average monthly payment for all debts secured by Vehicle 1.								
	Do not include costs for leased vehicles.								
	To calculate the average monthly payment here and on line 1 are contractually due to each secured creditor in the 60 month bankruptcy. Then divide by 60.		at						
	Name of each creditor for Vehicle 1	Average monthly payment							
	-NONE-	\$							
	Total Average Monthly Payment	\$	Copy here => -\$	0.0	Repeat this amount on line 33b.				
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0,	enter \$0	. \$	0.00	Copy net Vehicle 1 expense here => \$ _	0.00			
Ve	nicle 2 Describe Vehicle 2:								
13d.	Ownership or leasing costs using IRS Local Standard		. \$	0.00					
13e	Average monthly payment for all debts secured by Vehicle 2. leased vehicles.	Do not include costs fo	r						
	Name of each creditor for Vehicle 2	Average monthly payment							
		\$							
			Сору		Repeat this				
	Total average monthly payment	\$	here => -\$	0.00	amount on line				
13f.	Net Vehicle 2 ownership or lease expense				Copy net				
	Subtract line 13e from line 13d. if this number is less than \$0,	enter \$0	\$	0.00	Vehicle 2 expense here => \$ _	0.00			
14.	Public transportation expense: If you claimed 0 vehicles in Public Transportation expense allowance regardless of we				the \$	0.00			
15.	Additional public transportation expense: If you claimed 1 also deduct a public transportation expense, you may fill in who to claim more than the IRS Local Standard for <i>Public Transp</i>	or more vehicles in line nat you believe is the a	e 11 and if you cla	aim that yo		0.00			

Oth	er Nece	essary Expenses	the following IRS categories		s listed above,	, you are allowed your monthly expense	s for	
16.	self-en your pa and su	nployment taxes, soc ay for these taxes. H	cial security taxes, and Medic lowever, if you expect to rece rom the total monthly amoun	care taxes	. You may inc refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	\$	250.22
17.	contrib	outions, union dues, a				quires, such as retirement  1(k) contributions or payroll savings.	\$	359.02
18.	Life In filing to Do not	surance: The total r	monthly premiums that you p ments that you make for you or life insurance on your depo	ay for you r spouse's	r own term life term life insu	e insurance. If two married people are	\$	0.00
19.	admini	strative agency, suc	The total monthly amount the has spousal or child support	t payment	S.	by the order of a court or  You will list these obligations in line 35.	\$	0.00
20		_						
_0.		a condition for your jo	hly amount that you pay for e	oddodiioi i	triat io ottrior i	oquilou.		
	_			t child if n	o public educa	ation is available for similar services.	\$	0.00
21.	Childo	care: The total month	nly amount that you pay for c	hildcare, s	such as babys	sitting, daycare, nursery, and preschool.		
	Do not	include payments fo	or any elementary or seconda	ary school	education.		\$	0.00
22.	Additional health care expenses, excluding insurance costs: The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.						\$	0.00
23.	3. Optional telephone and telephone services: The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer.							
						rvice. Do not include self-employment ount you previously deducted.	+\$_	0.00
24.		II of the expenses a nes 6 through 23.	allowed under the IRS expe	nse allow	vances.		\$	2,290.24
Add	litional	Expense Deduction	ns These are additional on Note: Do not include a					
25.	insura					ises. The monthly expenses for health ly necessary for yourself, your spouse, or	or	
	Health	insurance		\$	0.00			
	Disabi	lity insurance		\$	0.00			
	Health	savings account	-	<b>+</b> \$	0.00	_		
	Total			\$	0.00	Copy total here=>	\$	0.00
	Do you	u actually spend this No. How much do y						
		Yes		\$				
26.	continu	ue to pay for the reas ousehold or member	sonable and necessary care	and suppo no is unab	ort of an elder le to pay for s	e actual monthly expenses that you will ly, chronically ill, or disabled member of uch expenses. These expenses may 29A(b)	\$	0.00
27.	Protec	ction against family	violence. The reasonably n	ecessary	monthly expe	nses that you incur to maintain the es Act or other federal laws that apply.		
	By law	, the court must keep	p the nature of these expens	es confide	ential.		\$_	0.00

ebtor 1	EDWIN ORTIZ ORTIZ	Case number (if known)					
	Additional home energy costs. Your homine 8.	ne energy costs are included in your insurance and operating	expenses	on			
	f you believe that you have home energy on the fill in the excess amount of home er	costs that are more than the home energy costs included in energy costs	xpenses or	n line			
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must show that the acary.	dditional		\$	0.00	
	Education expenses for dependent child \$189.58* per child) that you pay for your depublic elementary or secondary school.	dren who are younger than 18. The monthly expenses (not expendent children who are younger than 18 years old to atter	more than nd a private	or			
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain why the not already accounted for in lines 6-23.	amount				
,	Subject to adjustment on 4/01/25, and even	ery 3 years after that for cases begun on or after the date of a	adjustment		\$	0.00	
ŀ		the monthly amount by which your actual food and clothing ear g allowances in the IRS National Standards. That amount car se in the IRS National Standards.					
		tional allowance, go online using the link specified in the sepa so be available at the bankruptcy clerk's office.	arate				
•	You must show that the additional amount	claimed is reasonable and necessary.			\$	0.00	
	Continuing charitable contributions. The nstruments to a religious or charitable orga	e amount that you will continue to contribute in the form of car anization. 11 U.S.C. § 548(d)(3) and (4).	sh or finan	cial			
I	Do not include any amount more than 15%	of your gross monthly income.			\$	0.00	
	22. Add all of the additional expense deductions. Add lines 25 through 31.						
-	Add lifles 25 tillough 51.						
	ctions for Debt Payment			L			
Dedu	ctions for Debt Payment	in property that you own, including home mortgages, ye	hicle	L			
Dedu 33. Fo	ctions for Debt Payment	in property that you own, including home mortgages, ve 33a through 33e.	hicle	L			
Dedu 33. Fo	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines	s 33a through 33e.  nent, add all amounts that are contractually due to each secul					
Dedu 33. Fo	ctions for Debt Payment or debts that are secured by an interest ans, and other secured debt, fill in lines of calculate the total average monthly paym	s 33a through 33e.  nent, add all amounts that are contractually due to each secul				monthly	
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■ No.	Go to line 35.							
☐ Yes.	State any amount that you listed in line 33, to keep po Next, divide by 60 and fill	ossession of your propert						
Name of the	creditor	Identify property that s	ecures the debt		Total cure amount		Monthly o	cure
-NONE-				\$		÷ 60 = \$		
				Total	\$	Copy total here=	Φ.	0.00
	owe any priority claims - s due as of the filing date o				at			
■ No. □ Yes.	Go to line 36.  Fill in the total amount of a ongoing priority claims, su  Total amount of all past-	ich as those you listed in			\$ 0.0	<b>0</b> ÷ 60	) \$	0.00
36. Projecte	d monthly Chapter 13 pla				\$		·	
Office of the Exec To find a l	multiplier for your district as the United States Courts (foutive Office for United State ist of district multipliers that incl nstructions for this form. This lis	or districts in Alabama an es Trustees (for all other oudes your district, go online o	d North Carolir districts). using the link spe	trative ha) or by ecified in the	×			
Average	monthly administrative exp	ense			\$	Copy to here=>		
37. Add all	of the deductions for deb	ot payment. Add lines 33	e through 36.				\$	987.80
Total Deduc	ctions from Income							
38. <b>Add all (</b>	of the allowed deductions							
Copy lir	ne 24, All of the expenses a e allowances	llowed under IRS	\$	2,290.24	_			
expens	ne 32. All of the additional e	xpense deductions	\$	0.00	_			
<i>expens</i> Copy lir	,							
Copy lir	ne 37, All of the deductions	for debt payment	+\$	987.80	<u>-</u>			

Debtor 1	ror 1 EDWIN ORTIZ ORTIZ Case number (if known)											
Part 2:	D	etermine You	r Disposable Income Under 11 U.S.C.	. § 132	5(b)	)(2)						
			ent monthly income from line 14 of F urrent Monthly Income and Calculati							\$	3	3,271.00
c r	childre disabilit eceive	<ul> <li>The monthly payments for discourage</li> <li>d in accordance</li> </ul>	y necessary income you receive for some you receive for some you average of any child support payment or a dependent child, reported in Part I one with applicable nonbankruptcy law to need for such child.	s, foste	er c 122	are payments, 2C-1, that you	or	\$	0	.00		
e ii	employ n 11 U.	er withheld fro	tirement deductions. The monthly total m wages as contributions for qualified rows all required repayments of loans § 362(b)(19).	etireme	ent	plans, as spec	ified	\$	0	.00		
42. <b>1</b>	Total o	f all deduction	ns allowed under 11 U.S.C. § 707(b)(2	<b>2)(A).</b> C	Copy	y line 38 here	=>	\$	3,278	.04		
ŧ	expens heir ex	es and you ha penses. You n	al circumstances. If special circumstar we no reasonable alternative, describe to the structure of the struc	the spe	cia	l circumstance						
Desc	cribe tl	he special cir	cumstances			Amount of	exper	se				
						\$						
						\$						
						\$ \$						
				Total	\$_	0.0	00	Co	py re=> \$	0.00		
44. <b>T</b>	Γotal a	djustments. A	dd lines 40 through 43			=>	\$	J	3,278.04	Copy here=> -\$	3	3,278.04
45. <b>(</b>	Calcula	ate your mont	hly disposable income under § 1325(	(b)(2).	Sub	otract line 44 fr	om lin	ne 39	Э.	\$		-7.04
art 3:	С	hange in Inco	me or Expenses									
t t	nave ch ime yo /ou file	nanged or are vur case will be did your petition,	r expenses. If the income in Form 1220 virtually certain to change after the date open, fill in the information below. For check 122C-1 in the first column, entern when the increase occurred, and fill in	you fil exampl r line 2	ed : le, i in t	your bankrupto f the wages re the second col	cy pet ported umn,	ition d inc	and during the reased after			
Form	1	Line	Reason for change			Date of ch	ange		Increase or decrease?	Amount o	of change	
□ 12	22C-1 22C-2 22C-1								☐ Increase ☐ Decrease ☐ Increase	\$		
	220-1 220-2								Decrease	\$		

☐ 122C-1 ☐ 122C-2

☐ 122C-1

■ 122C-2

☐ Increase

☐ Decrease

☐ Increase

☐ Decrease

Part 4:	Sign Below
[	By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.
X	/s/ EDWIN ORTIZ ORTIZ
	EDWIN ORTIZ ORTIZ Signature of Debtor 1
Date	November 18, 2022  MM / DD / YYYY
	וווויו / סט / וווויו

Case number (if known)

Debtor 1 EDWIN ORTIZ ORTIZ

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

## The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$78	administrative fee	
+ \$15	trustee surcharge	
\$338	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses">http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses</a>.

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/services-forms/bankruptcy/cre">http://www.uscourts.gov/services-forms/bankruptcy/cre</a> dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### United States Bankruptcy Court District of Puerto Rico

In	re	EDWIN ORTIZ ORTIZ		Case No.	
			Debtor(s)	Chapter	13
		DISCLOSURE OF COMPE	ENSATION OF ATTOR	NEY FOR DE	EBTOR(S)
1.	cor	rsuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 inpensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankruptcy, o	r agreed to be paid	to me, for services rendered or to
		For legal services, I have agreed to accept		\$	4,000.00
		Prior to the filing of this statement I have received		\$	300.00
		Balance Due		\$	3,700.00
2.	The	e source of the compensation paid to me was:			
		■ Debtor □ Other (specify):			
3.	The	e source of compensation to be paid to me is:			
		■ Debtor □ Other (specify):			
4.		I have not agreed to share the above-disclosed com	pensation with any other person un	nless they are mem	bers and associates of my law firm.
		I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the na			
5.	In	return for the above-disclosed fee, I have agreed to a	render legal service for all aspects	of the bankruptcy c	ease, including:
	b. c.	Analysis of the debtor's financial situation, and reno Preparation and filing of any petition, schedules, sta Representation of the debtor at the meeting of credi [Other provisions as needed]  Negotiations with secured creditors to reaffirmation agreements and applicati 522(f)(2)(A) for avoidance of liens on he	ntement of affairs and plan which notes and confirmation hearing, and reduce to market value; exert ons as needed; preparation a	nay be required; any adjourned hea  nption planning;	rings thereof;
6.	Ву	agreement with the debtor(s), the above-disclosed for Representation of the debtors in any diany other adversary proceeding.			es, relief from stay actions or
			CERTIFICATION		
this		ertify that the foregoing is a complete statement of an kruptcy proceeding.	ny agreement or arrangement for p	ayment to me for re	epresentation of the debtor(s) in
	Nov	rember 18, 2022	/s/ MANUEL E FUS	TER MARTINEZ	
-	Date		MANUEL E FUSTE		
			Signature of Attorney MANUEL E. FUSTE		
			P.O. BOX 1464		
			Guayama, PR 0078 7878643015 Fax: 7		
			fuster_law_office@		
			Name of law firm		

### United States Bankruptcy Court District of Puerto Rico

In re	EDWIN ORTIZ ORTIZ		Case No.							
		Debtor(s)	Chapter	13						
	VERIFICATION OF CREDITOR MATRIX									
The abo	The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.									
Date:	November 18, 2022	/s/ EDWIN ORTIZ ORTIZ								
		EDWIN ORTIZ ORTIZ								
		Signature of Debtor								

EDWIN ORTIZ ORTIZ PO BOX 2973 GUAYAMA, PR 00785 NAYDA I ALVARADO URB LA HACIENDA ST 54 AN-18 GUAYAMA, PR 00784

MANUEL E FUSTER MARTINEZ MANUEL E. FUSTER MARTINEZ P.O. BOX 1464 GUAYAMA, PR 00785 SISTEMA DE RETIRO DE EMPLEADOS DEL GOBIERNO DE PUERTO RICO PO BOX 42003 SAN JUAN, PR 00940

ASOCIACION DE EMPLEADOS DE ELA DE PR PO BOX 364508 SAN JUAN, PR 00936 TRANSWORLD SYSTEMS INC. 500 VIRGINIA DR. SUITE 514 FORT WASHINGTON, PA 19034-8770

ASOCIACION DE EMPLEADOS DE ELA DE PR DE ELA DE PR PO BOX 364508 SAN JUAN, PR 00936

BANCO POPULAR DE PUERTO RICO PO BOX 362708 SAN JUAN, PR 00936-2708

CAPITAL ONE PO BOX 71083 CHARLOTTE, NC 28272-1083

COOP A/C ELECTRO-COOP AVE. SAN ALBERTO 605 STE. 307 SAN JUAN, PR 00907-3811

DPT DE TRANSPORTACION Y OBRAS PUBLICA DE ELA PR PO BOX 41269 SAN JUAN, PR 00902

FREEDOMROAD FINANCIAL PO BOX 4597 HINSDALE, IL 60522-4597